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PRACTICAL NURSE EDUCATION IN NORTH CAROLINA



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PRACTICAL NURSE EDUCATION IN NORTH CAROLINA



ISSUED BY THE
STATE DEPARTMENT OF PUBLIC INSTRUCTION
Trade and Industrial Education
RALEIGH, N. C.

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FOREWORD

The accelerated growth of population in North Carolina and the rapid advancement in medical technology demand an increased number of well-trained personnel for health services. Realizing this need, the State Department of Public Instruction, in conjunction with local hospitals, administers programs of practical nurse education in local communities and in the industrial education centers throughout the State. The program aims to prepare adults and out-of-school youth, 18 years of age or older, as licensed practical nurses to aid registered nurses, physicians, and other health workers in caring for the sick and injured in North Carolina.

This bulletin was prepared by Miriam Daughtry, R.N., Assistant State Supervisor of Trade and Industrial Education for Practical Nursing, and Donald H. Craver, Technical Writing Consultant for the Vocational Materials Laboratory, under the supervision of Charles D. Bates, State Supervisor of Trade and Industrial Education, and Anthony J. Bevacqua, Coordinator, Vocational Materials Laboratory.

It is hoped that this bulletin, which contains significant facts about Practical Nurse Education in North Carolina, will be useful to prospective students, officers of local administrative units, medical and health personnel, and others interested in the Practical Nurse Education Program.



State Superintendent of Public Instruction

August 1959
January 1963, Revised

PRACTICAL NURSING IN NORTH CAROLINA

Those who :

- Are interested in becoming licensed practical nurses
- Are licensed practical nurses
- Are citizens interested in better nursing service for the people in the community
- Are doctors or health officials who employ licensed practical nurses
- Are registered nurses who work with licensed practical nurses
- Are hospital administrators who need nurses
- Are superintendents of administrative units which operate programs in practical nursing or would like to operate such programs
- Are guidance counselors
- Are members of a group which aids in the recruitment of health personnel by sponsoring information relative to health careers
- Or are presidents of civic clubs which want to stimulate persons to enter a health career by offering scholarships

Will want to read this booklet . . .

The Need

By 1970, it is estimated that over five million residents will be living in this State. Concomitant with an increase in population is an increased need for personnel trained to care for the sick and injured, for almost all people at sometime in their lives need medical attention. One way to meet this need is to provide more graduate licensed practical nurses.

The rapid growth of health insurance plans has caused a large increase in the number of people seeking hospital care. More babies are being born in North Carolina; the "aging" population is rapidly increasing with the advances in medical science. Nurses are needed on every level today. By 1970-1975, these needs will be increasingly urgent.

There are 34 schools in North Carolina for educating registered nurses, but the number which these schools graduate each year is not large enough to meet the ever increasing demands made upon them.

What can be done? When one wants a nurse—he wants a nurse—now! One of the answers, it is believed, is to increase the number of well-trained practical nurses to supplement the services of registered nurses so that better nursing care can be given to all of the citizens of North Carolina. As a registered nurse is called upon to perform more highly technical duties, the well-prepared licensed practical nurse is needed to assist her and the physician in the care of the sick and injured. Practical Nursing has become an essential and integral part of all nursing.

What Is a Licensed Practical Nurse?

A licensed practical nurse is a person who holds a State license which permits her to nurse in North Carolina and to call herself a "Licensed Practical Nurse" (LPN). This license, issued by the North Carolina Board of Nurse Registration and Nursing Education Enlarged, Raleigh, must be renewed annually. When one employs an LPN, he should ask to see the license; it is a means of identification.

Related studies give practical nursing students the necessary background for a successful vocation.



Is a "Nurses Aide" the Same as a Practical Nurse?

No. Usually a nurses aide has had only on-the-job training. She performs services related to nursing care, but is always under the close supervision of a registered nurse. A nurses aide is not licensed and cannot be licensed under present North Carolina law; however, she is properly considered an important member of the nursing team.

How Many Licensed Practical Nurses Are there in North Carolina?

There were 5,348 practical nurses licensed to practice in the State of North Carolina in 1962. This is an increase of over 1,198 since 1958.

What Are the Functions of a Licensed Practical Nurse?

"Under supervision, the following functions may be performed by licensed practical nurses with sufficient preparation to insure safe practice:

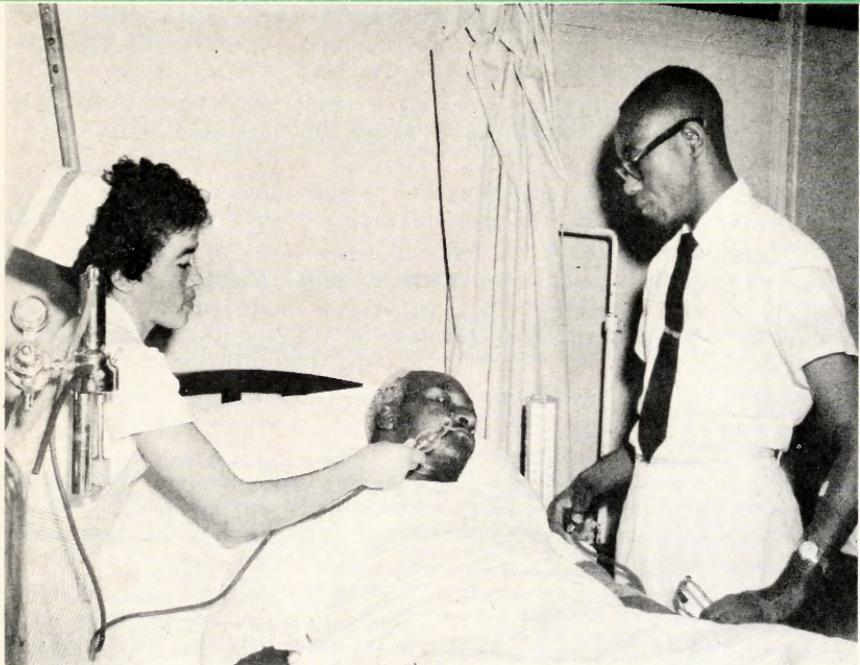
- I. Assisting with the preparation, implementation, and continuing evaluation of the nursing plan by:
 - A. Providing for the emotional and physical comfort and safety of patients through:
 1. Understanding of human relationships between and among patients and personnel, patients and families, and families and personnel.
 2. Recognition and understanding of cultural backgrounds, spiritual needs including respect for the religious beliefs of individual patients.
 3. Recognition and understanding of the effects of social and economic problems upon patients.
 4. Protection of patients from behavior which would damage their self-esteem or their relationship with their families, other patients, or personnel.
 5. Participation in the development, revision, and implementation of policies and procedures designed to insure comfort and safety of patients and personnel in hospital, other agencies, and private homes.

6. Attention to the general health care of patients, assisting with cleanliness, grooming, rest, nourishment, and elimination.
 7. Maintenance of an attractive and comfortable environment for the patient with special consideration as to cleanliness, ventilation, lighting, repairs, supplies, and furniture selection and arrangement.
- B. Observing, recording, and reporting symptoms, reactions, and changes to the appropriate person including:
 1. General physical and mental condition of patients, and signs and symptoms which may be indicative of untoward changes.
 2. Stresses in human relationships between patients, between patients and personnel, and between patients and their families and visitors.
- C. Performing selected nursing procedures in those circumstances where a professional degree of evaluative judgment is not required, such as:
 1. Administration of medications and treatments prescribed by the physician.
 2. Preparation and care of patients receiving specialized treatments administered by the physician or the professional nurse.
 3. Performance of special nursing techniques in caring for patients with communicable diseases.
 4. Practice of first-aid measures.
 5. Utilization of nursing procedures as a means of facilitating communication and interaction.
 6. Preparation and after-care of equipment for treatments, administered by the physician or other professional workers, including necessary sterilization and observation of aseptic techniques.
- D. Assisting with the rehabilitation of patients according to the medical care plan through:
 1. Awareness and encouragement of the interests and special aptitudes of patients.
 2. Encouragement of patients to help themselves within their own capabilities in performing activities of daily living.
 3. Knowledge and application of the principles of prevention of deformities, the normal range of motion, body mechanics, and body alignment.

- II. Contributing to the attainment of the goals of the agency by :**
 - A. Utilizing opportunities in contacts with patients' relatives to promote better understanding of agency policies.**
 - B. Fostering cooperative effort among personnel by understanding the functions of other persons involved in patient care and by actively participating in team and staff conferences.**
 - C. Utilizing community relationships to contribute to better public understanding of health services.**
- III. Assuming responsibility for personal and vocational growth and development by :**
 - A. Actively participating in nursing organizations.**
 - B. Promoting and participating in in-service programs, learning on the job.**
 - C. Promoting and participating in workshops and institutes and other educational programs.***

*This statement was approved by the Executive Board of the National Federation of Licensed Practical Nurses and by the Board of Directors of the American Nurses' Association in January 1957.

Practical Nursing is a vocation for men as well as women.



What Is The Position Description for the Licensed Practical Nurse?

This position description was prepared to be used as a guide for employers of the graduate licensed practical nurse so that they may understand what this person is prepared to do. It is hoped that it will also serve to guide the employer in assisting the licensed practical nurse to expand her knowledge and skills through in-service educational programs.

Materials used in the preparation of this position description were obtained from the State Departments of Education of Georgia and Florida.

It is to be understood that this position description in no way should be considered the ultimate word on the duties required of the licensed practical nurse, but rather that they may be modified to meet the philosophy and policies of each individual agency or institution.

A. Characteristics of the Class

General Nature of Work.

Under the immediate supervision of the registered nurse (Supervisor, Head Nurse, Team Leader, or other designated person) the licensed practical nurse may give basic nursing care to patients in all degrees of illness.

When nursing needs are not highly subject to change and medical orders are not complicated, the licensed practical nurse may work with less supervision to meet all of the patient's physical and emotional needs.

In more complex situations requiring scientific understanding and judgment, the licensed practical nurse assists the registered nurse or physician.

The responsibility for identifying the nursing needs of patients and for delegating appropriate nursing functions and measures rests with the registered nurse.

Upon graduation from the course, the licensed practical nurse is only a beginning practitioner with basic training in specific areas. Her expertise will develop through continued help, guided experiences, and in-service education.

B. Job Requirements

Skill or Ability

Dependability: The licensed practical nurse will adhere to work obligations and responsibilities, carry responsibility of trust and confidence, know how to treat confidential information and be loyal to the organization of which she is a part.

The licensed practical nurse will be able to accept and share the obligation for patient care on all hours of duty, weekends and holidays; maintain a standard of work for herself in routine duties that do not require

constant, detailed supervision; complete assignments without repeated checking; follow safety measures to protect patients, personnel and visitors from injury; conform to hospital regulations, policies and procedures; effectively use equipment and materials; and practice economy. The licensed practical nurse should recognize her limitations in knowledge or skill and ask for assistance.

Accuracy: The licensed practical nurse will be expected to receive instructions, follow assignments and apply knowledge.

She will be able to follow detailed instruction with accuracy; carry out procedures and techniques properly and be able to adapt them to individual needs and conditions of patients; recognize and report unusual signs and symptoms; administer selected medications, orally or by injection; chart care given to patients; and present facts and make reports accurately.

Productivity: She will be able to work according to schedules and complete an acceptable amount of work in a given time; adjust work schedules to meet emergency needs; and organize her work assignments.

She should be assigned only to patient units, clinical units, special services or departments where registered nurse direction and supervision are available.

Knowledge and Skill: She will be able to use reasonable skill in the many techniques of nursing care which she has been taught. She will be thoroughly familiar with basic principles.

Working Relationships: She will be able to demonstrate effective working relationships with patients, co-workers and the public and practice established channels of communications for meeting the needs of the job.

Mental Stability: The licensed practical nurse will be able to exercise good judgment, note and report changes of work conditions or the occurrence of unusual situations, and she will be prompt and resourceful when emergencies arise.

C. Personal Work Contacts

The licensed practical nurse will be able to exhibit the same acceptable behavior traits and attitudes that are expected from the registered nursing staff.

D. Duties

The licensed practical nurse through the following skills and related activities shares in meeting the basic needs of all patients:

Technical Skills	Knowledges, Degrees of Responsibility, and Related Activity
-------------------------	--

1. *Provides for Physical, Mental, and Emotional Care and Safety of all Patients.*

a. Assists with all personal care for patient's daily needs (baths, bed, skin, back, hair, shampoo, nails, mouth care).	a. Understands basic principles and need for modifying procedures according to patient's condition; knows safety precautions, proper measures to use in preventative care; understands and observes emotional needs to be met in caring for all types of patients.
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- b. Assists with dietary and fluid intake needs of patients.
- c. Provides for all types of elimination of patients and keeps records of these.
- d. Observes proper body alignment of all patients. Assists patients in or out of bed.
- e. Observes all basic principles in relation to the environment of the patient.
- f. Observes, reports, and charts usual and unusual signs and symptoms in accordance with licensed practical nurse preparation.

2. *Provides for Special Nursing Needs of Patients, Adults or Infants, such as Admission or Discharge of Patients.*

- a. Takes temperature, pulse and respiration, blood pressure, weight and measure; collects specimens; cares for clothing.
- b. Knows how to transport patients by wheel chair or stretcher.
- c. Assists physician or registered nurse with physical examinations, treatments or special diagnostic tests; assembles equipment; supports patient; cleans and restores equipment.
- b. Knows basic principles of diet, general and special, and conditions for which these are prescribed.
- c. Understands and reports unusual characteristics of excreta; gives special care to incontinent patients.
- d. Understands principles of good body mechanics both for the patient and for self; knows the principles of supporting or immobilizing extremities when necessary; understands different positions in bed and kind of support needed for each position; understands principles used in ambulating patients.
- e. Understands importance of good housekeeping procedures as a part of the patient's daily care.
- f. Knows basic normal or abnormal symptoms and importance of reporting changes in patient's need for help on individual, emotional or spiritual problems.
- a. Knows methods and principles used in cleansing thermometers; knows characteristics of pulse; recognizes changes in respiration; knows importance of accuracy in relation to all the vital signs; knows symptoms and emergency care of shock.
- b. Understands safety practices.
- c. Knows how to assemble equipment and how to position patients for examination or treatment; charts examination, understands why tests are made and knows importance of following specific directions in preparing patients, physically and mentally, for tests.

3. Performs Selected Nursing Procedures in Circumstances Where a Professional Degree of Judgment Is Not Required.

- a. Administers all types of enemas and colonic, colostomy, and vaginal irrigation.
- a. Understands the principles and purposes of enemas and irrigations; knows how to prepare commonly used solutions; understands the importance of skin care and of teaching patient to care for self; knows how to observe results and keep records.
- b. Gives eye and ear treatments to selected patients—irrigations, compresses, drops and ointments.
- b. Knows principles and purposes, precautions, techniques and safety measures to use in treatment of all eye and ear patients.
- c. Applies all types of hot and cold applications.
- c. Knows principles of hot or cold applications, precautions to use to prevent injury, difference in age resistance to heat or cold, and modifications of procedures, danger of prolonged applications, and unfavorable symptoms to observe.
- d. Assists or gives preoperative and postoperative care, including skin preparation and elimination; administers personal-physical and emotional care; prepares bed and unit for return from surgery; cares for selected patients and assists registered nurse in caring for others during reaction from anesthesia.
- d. Knows procedures to follow in the preparation of patients for the different types of surgery; takes care of the patient's personal belongings; knows importance of close observations of signs and symptoms such as color, temperature, bleeding, need for using oral suction; carries out, or assists registered nurse in the above procedures and findings.
- e. Applies and changes simple dressings using surgical aseptic techniques.
- e. Knows the principles of surgical aseptic technique and importance of observing same; cares for equipment after use; assists with complicated dressings.
- f. Assists with care of patients receiving oxygen.
- f. Knows principles and methods of oxygen therapy, precautions and safety measures to observe and operation of equipment.
- g. Performs catheterization and irrigation and instillation of urinary bladder under supervision.
- g. Understands reasons and methods to use in catheterization and bladder irrigations, precautions to use against injury or infection and importance of seeking professional supervision.

h. Prepares and administers selected medications

1. Orally
2. Inhalations
3. Rectally
4. Sublingually
5. Externally
6. Injections:
subdermal
subcutaneous
intramuscular

h. Knows legal aspects and responsibilities of administering medications; knows abbreviations used metric and apothecaries systems, and household equivalent; knows standard dosages and reactions, normal or abnormal.

Is not expected to administer medications or solutions requiring fractional or complex computation of dosage.

Prepares hypodermic or intramuscular injections from tablets, ampoules or multiple dose vials; is aware of the responsibility and importance of reporting errors and the need for supervision in administering drugs requiring professional judgment; knows the rules to observe regarding the Harrison Narcotic Law.

i. Cares for the body after death.

i. Knows procedure to follow in certification of death by physician; is considerate of emotional state of family.

4. *Prepares and Cares for Patients Receiving Specialized Treatments Administered by the Physician or the Registered Nurse such as:*

a. Assists with intravenous therapy, blood transfusion, hypodermoclysis.

a. Under supervision of the registered nurse or physician, the licensed practical nurse helps prepare the patient and equipment; assists in starting as directed; knows how to regulate flow and signals to watch for. May discontinue treatment upon specific instructions from registered nurse or physician.

b. Assists with the care of patients receiving artificial feeding or gastric lavage.

b. Assembles the equipment; prepares the patient; and assists the registered nurse or physician with the insertion of the tubes; upon specific instruction may irrigate or instill liquid feeding into tubes.

- c. Gives care to patients in cast or traction or on special beds such as stryker frames.
- c. Knows principles of positioning and care of patients in cast in regard to circulation, etc.; understands purpose and care of tractions. Should have specific instructions and assistance in turning or moving patients.
- d. Cares for suction equipment and other special equipment as directed.
- d. Knows when and how to empty drainage bottles, measure and record character of drainage; reports non-functioning apparatus. Has not been instructed in the care of chest suction apparatus.
- e. Assists with the care of tracheotomy patients.
- e. Knows general principles used in nursing care, techniques used for removing mucus from air-way, and importance of seeking help promptly if signs of obstruction appear; under supervision, cleans and replaces inner tube when necessary. Should not assume the responsibility for the postoperative tracheotomy patients.
- f. Assists the physician with special treatments such as:
 1. Thoracentesis
 2. Abdominal paracentesis
 3. Spinal tap
- f. Knows equipment used; knows how to position a patient, how to assist the physician, how to care for specimens, and what to watch for after treatment.

5. *Performs Special Nursing Techniques in Caring for Adults and Children with Communicable and Infectious Diseases.*

- a. Uses medical aseptic techniques.
- a. Knows meaning of isolation, methods of preventing the spread of communicable and infectious diseases, and care of patient and articles used in the unit.

6. *Understands First Aid, Disaster, Civil Defense Measures, and Home Nursing Care.*

- a. Assists in treating patients in shock; gives artificial respiration; assists in transporting injured, bandaging, convulsions and unconsciousness.
- a. Knows approved first aid measures as recommended by American Red Cross and disaster nursing authorities.
- b. Gives or teaches patients and family home nursing care.
- b. Knows how to care for patients in the home and how to improvise equipment and modify procedures to meet existing situations.

7. Assists in Meeting the Special Needs of the Sick Child.

- a. Assists or gives assistance in meeting all daily needs of the sick child; assists with treatments, examinations, feedings, diversional and rehabilitation activities.
- a. Understands child growth and development and the necessity for adjustment to meet the needs of the child; knows how to modify procedures according to age; knows safety measures to be observed in the selection of toys and games.

8. Assists in Meeting the Special Nursing Needs of the Mother, Pre and Post-Partum.

- a. Assists in preparing mother for delivery and in caring for her during labor; assists in delivery room; gives post-partum care.
- a. Knows signs and stages of labor and process of delivery and routine preparation for labor and delivery; knows what to watch for during immediate post-partum period; understands principles of perineal and breast care.

9. Assists in Meeting the Special Nursing Needs of the Newborn Infant.

- a. Gives routine care to the normal newborn infant.
- a. Knows importance of watching newborn for breathing, bleeding and color; knows importance of proper identification at all times; observes and records number, color and consistency of stools; knows the method of preparing formulas; gives feedings; uses aseptic techniques.
- b. Assists registered nurse with the care of the abnormal or sick infant.

10. Gives Comprehensive Nursing Care to the Aged or Long-Term Patient.

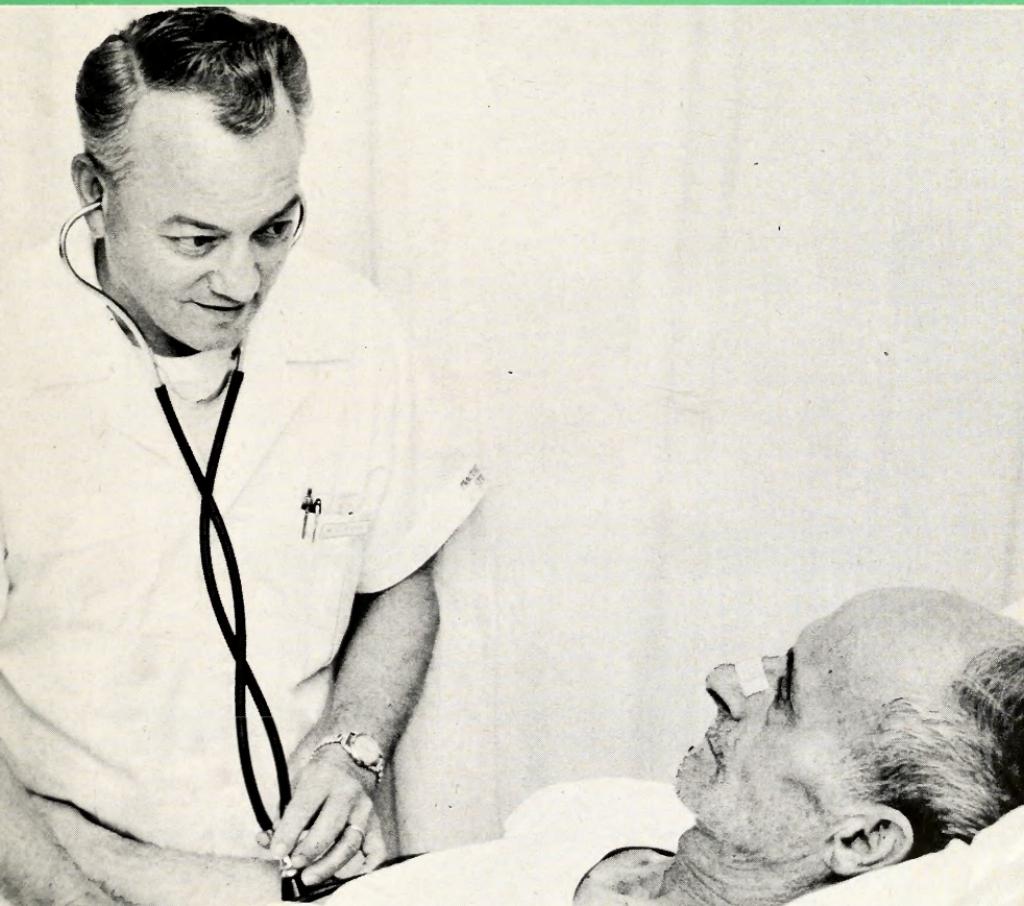
- a. Gives routine daily care as well as special treatments.
- a. Understands the aging process and the need to modify nursing measures to meet special care of the skin, care of circulatory problems, care of mental and emotional needs.
- b. Assists with the rehabilitation of the stroke victim
 - 1. Positioning
 - 2. Crutch walking
 - 3. Ambulating alone
 - 4. Physical therapy treatments
- b. Understands how to care for the stroke victim before and after ambulation and the importance of early ambulation; knows the importance of preventing and caring for bed sores, understands the importance of and nutritional problems of the aged.

Practical nursing in its modern sense is really a new vocation. It is only partly understood by persons who work with licensed practical nurses: doctors, registered nurses, hospital administrators, and other personnel within hospitals and agencies. The best use of licensed practical nurses will be made when their associates better understand what they are trained to do and when their role on the health team is more clearly defined by medical and nursing groups.

Where Do Licensed Practical Nurses Work?

Many practical nurses, as one may suppose, work in general hospitals; but they also work in specialized hospitals (TB, mental, geriatric, etc.), industries, schools, physicians' offices, and private and nursing homes.

Caring for the aged is an important LPN service.



The following statistics show the number of licensed practical nurses employed by each of these agencies in North Carolina in 1962:

Hospitals	2,749	Nursing Homes	228
Physicians' offices	324	Private duty	1,037
Industries	11	Other	43
Schools & Public Health	16	Not working	940

What Type of Person Is the Licensed Practical Nurse?

Most practical nurses have entered nursing because they receive satisfaction from serving others. A frequent response to the question "Why did you go into practical nursing?" is, "I always wanted to be a nurse." This is particularly true of those entering school today. Many who had wanted to be nurses did not have the money or time to go to a professional school when they were younger; others married and raised a family.

About 79 per cent of the LPN's in North Carolina are white women; 20 per cent are Negro women; and 1 per cent are white and Negro men.

A surprisingly large percentage of those entering practical nursing school programs today are widowed, divorced, or separated. Marriage, however, is no barrier to training to be a licensed practical nurse if home responsibilities permit one to give a year to this type of education. Because of the experience and information that the married person has acquired in caring for her home and raising a family—when they are sick and when they are well—she is considered a good applicant for practical nurse education. Those men who are LPN's find that this health career is a suitable and rewarding one with many opportunities for service.

About 44 per cent of all the LPN's in North Carolina are now graduates of the school programs of practical nursing. About 50 per cent of these graduates have a high school education.

How Much Are Licensed Practical Nurses Paid?

The beginning salary for licensed practical nurses in North Carolina ranges from two-thirds to three-fourths of the registered nurses' salary. In most places these nurses receive yearly increments until a set maximum is attained. Merit increments are also given in many places.

Are All LPN's Graduate Practical Nurses?

No. Of the number of licensed practical nurses practicing in North Carolina in 1962 only 44 per cent were graduate practical nurses. This is because approved school programs of practical nurse education have been in existence in North Carolina only since 1948. An average of approximately 175 have been graduated each year from North Carolina schools. In 1962, the schools graduated 416 students. As the programs of practical nursing improve and expand, the number of graduates will increase. In January 1963, there were 2,370 graduates currently licensed to practice as LPN's in North Carolina.

How did Those Who Did Not Go to School Get a License to Practice?

A law, passed in 1947, became a part of the Nurse Practice Act to license practical nurses. This is a permissive law which only protected the title of the licensed practical nurse; however,

Each Practical Nurse Education Program provides helpful resource material for the students.



it did provide for training of practical nurses in regulated programs. The law included a two-year waiver clause, with no examination or formal education requirement. Setting up such a waiver for a limited period of time is a customary procedure in any state passing its first licensing law covering a certain type of work. It meant that experienced practical nurses could secure a license by waiver without submitting to examination or providing proof of training. Two thousand five hundred twenty-three (2,523) practical nurses were licensed by reason of this waiver.

When the waiver clause expired July, 1949, there were still so many working practical nurses who desired to be licensed that a partial waiver was inserted in the legislation enacted by the 1953 General Assembly when it repealed and re-enacted the laws relating to nursing which became effective January 1, 1954. The new waiver for practical nurses required an examination, certification of two years' experience, and proof of education through the first year of high school, or its equivalent. One thousand three hundred and two (1,302) practical nurses were licensed under the law containing this waiver.

The 1955 General Assembly amended the practical nursing section of the nursing law and ended the waiver period as of July 1, 1956.

Obviously the three thousand eight hundred and twenty-five (3,825) practical nurses who received their license under these waiver provisions vary widely in training and other qualifications. They fall into the following four categories:

First: There is the licensed practical nurse who has been trained in a school of professional nursing, in some cases for 18 months or more. She has learned some of the basic skills of nursing care, although she did not complete the regular course required for the registered nurse.

Second: There is the licensed practical nurse who has learned about nursing on-the-job, either in the home or hospital. She has skills acquired by experience in making patients comfortable, and she is usually motivated by a genuine love of nursing.

Third: There is the licensed practical nurse who has taken a correspondence course in practical nursing from some commercial company. This study may have been coupled with some experience in a hospital or in home care. It enabled her to give enough evidence of training to meet legal requirements for a

license, but she has probably had little opportunity to apply the procedures outlined in the course.

Fourth: There is the licensed practical nurse who has received her license in another state. This could have been by graduation from an approved school of practical nursing, by examination, or by waiver. If she meets the standards of the North Carolina practical nursing requirements of the law, she is granted a license without examination. This procedure is called "license by endorsement."

Fifth: A fifth category describes the graduate LPN: There is the graduate licensed practical nurse. She has completed satisfactorily a prescribed course of study in an approved school of practical nurse education and has passed the examination given by the State's legal licensing authority.

Understandably, there is confusion today in the minds of those dealing with practical nurses, because there are so many categories. With preparation so varied and job performance so different, it is difficult to know what to expect from the licensed practical nurse. To become licensed to work as a practical nurse, according to present regulations, a person must have completed a course of study in practical nursing in an approved school program or must become licensed by endorsement from another state.

A certificate from a correspondence course in practical nursing does not qualify a person to take the State Board Practical Nurse Licensure Examination.

What is the Difference Between a Registered Nurse and a Graduate Licensed Practical Nurse?

A graduate licensed practical nurse spends one year in formal education learning her vocation. She is legally required to have had at least one year of high school education or the equivalent; however, individual school programs are requiring high school education or equivalency for admittance. Since the age range may be from 18 to 50 years of age, this is a good vocation for both young and mature women. The cost of training is usually small if the trainee lives at home. All programs charge fees ranging from \$50 to \$125. The student spends approximately 570 hours in the classroom and 1000 hours of practice in a hospital, where she receives experience and practice in caring for medical, surgical, maternity, and other types of patients. A

registered nurse usually spends 3 years (or maybe 2 or 4) in preparing herself for her profession; she must be a high school graduate in the upper half of the class; and she must be under 35 years of age. Her education will probably cost \$1000; and if she takes a college course in nursing, she will spend anywhere from \$1000 to \$2000 a year.

A GRADUATE PRACTICAL NURSE is one who has completed satisfactorily a course of study in a state accredited practical nurse education program.

A LICENSED PRACTICAL NURSE is one who has met all the requirements of the law (at the time she applied) and received a license to practice practical nursing in North Carolina or some other state having similar standards. The license permits the person to use the initials LPN. A licensed practical nurse may or may not be a graduate practical nurse.

A REGISTERED NURSE is one who has completed satisfactorily either a two-year, a three-year, or a four-year course of study in an accredited school of nursing and has passed the State licensing examination to qualify as a registered nurse.

RN—Registered Nurse

LPN—Licensed Practical Nurse

Who Educates Practical Nurses?

The educational programs in North Carolina, except for one instance, are under the direction and control of local boards of education and are a part of the program of vocational education. The responsibility for practical nurse education is shared by the local administrative unit and the hospitals (and other agencies) which give students their clinical practice. A local advisory committee, composed of professional and lay people and licensed practical nurses, acts as a consultant group to the school personnel.

Private agencies may also conduct schools of practical nursing which are not subject to the State Board of Education, but must meet the standards of the Nursing Board if their graduates are to be eligible for licensing.

PREPARATION for NURSING



ON-THE-JOB TRAINING

TIME VARIES



NURSES AIDE



PRACTICAL NURSE SCHOOL

ONE YEAR



PRACTICAL NURSE



HOSPITAL NURSING SCHOOL

THREE YEARS



REGISTERED NURSE (R.N.)



BASIC DEGREE PROGRAM IN
COLLEGES & UNIVERSITIES

FROM FOUR TO
FIVE YEARS



R.N.'S WITH BACHELOR'S
DEGREE

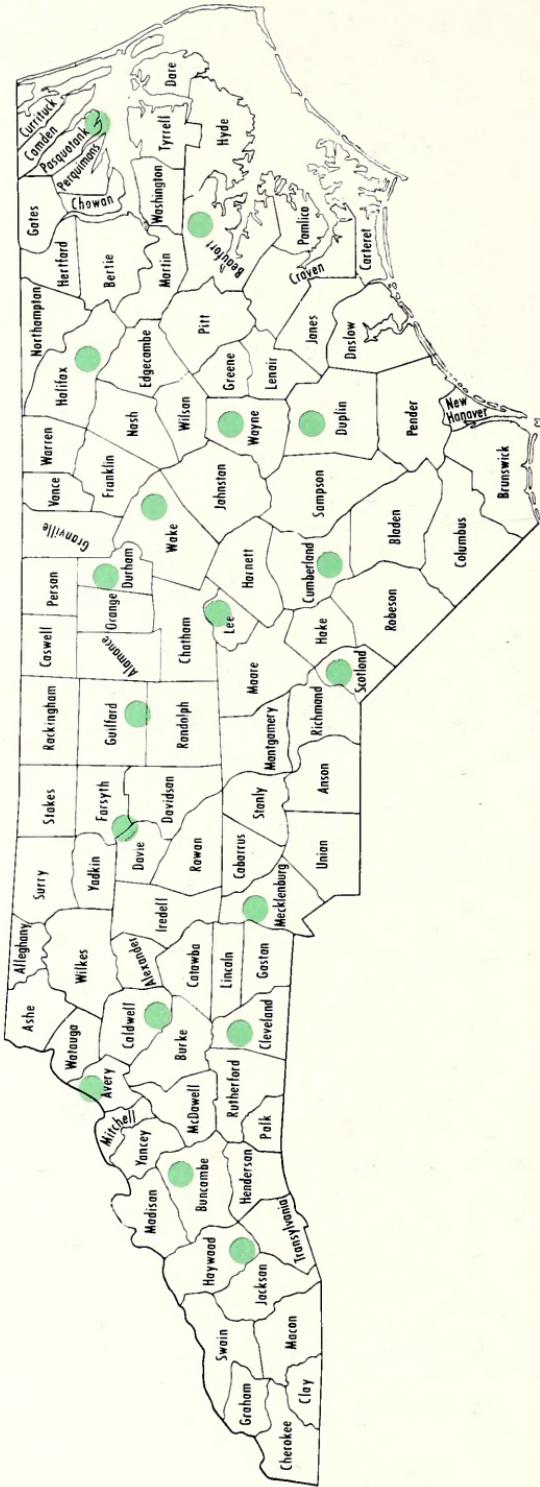


PROGRAMS FOR GRADUATE
NURSES

TIME VARIES

R.N.'S WITH BACHELOR'S
DEGREE, TEACHERS, etc.,
WITH MASTER'S OR
DOCTOR'S DEGREE

NORTH CAROLINA VOCATIONAL PROGRAMS OF PRACTICAL NURSE EDUCATION



Location of Vocational Programs
of Practical Nurse Education
By Counties

What Is an Accredited School Program?

An accredited school program of practical nurse education is one which has met the standards prescribed by the Nursing Board. All of the school programs of practical nursing which operate in North Carolina are accredited by the North Carolina Board of Nurse Registration and Nursing Education Enlarged. In accordance with law this Board prescribes the course of study and the standards which the schools will maintain. The Board also accredits the programs and determines whether the graduates may take the State licensing examination. In addition to Board approval, all public-supported vocational programs of Practical Nurse Education must be approved by the State Department of Public Instruction.

How Is the Practical Nurse Education Program Conducted?

The program, 52 weeks in length, is divided into approximately one-third time for classroom instruction, with a limited amount of related nursing practice in the hospital, and two-thirds time for instruction in applied nursing in an approved hospital. Instruction and practice include the care of medical, surgical, obstetric, and pediatric patients, as well as the special care required for those with chronic diseases and for the aging group.

What Is the Cost of the Course?

One must have funds for the school admission fee, purchase of books and supplies, uniforms and shoes, and the fee for the physician who gives the pre-admission physical examination. The student must also pay for room and board, unless she is living at home. These payments will vary according to the location and policy of the school program. Upon completion of the course, the graduate should take the licensing examination at Raleigh, for which there is a fee of \$15.

What Percentage of the Students Complete the Course?

Latest available figures show that over 75 per cent of the students entering the practical nursing program complete the course. Reasons frequently given by those who withdraw before



Practical nursing students often assist medical doctors.

graduation are the following: family responsibilities, personal health, failure to pass the subjects being studied, and insufficient money to finish the course.

Is Recruitment a Problem?

A common problem for all school programs of practical nursing is to fill their classes with qualified candidates. A great many of those who apply do not have sufficient education and aptitude for nursing. Then, too, the public often is not aware of the school program or does not know who is qualified to apply for admission to the program.

Licensed practical nurses who desire to increase their nursing knowledge and improve their nursing skills and effectiveness may do so by taking extension courses offered through city or county boards of education. For further details on extension courses, contact the local director of vocational education, the local director of industrial education centers, or write the Assistant State Supervisor of Trade and Industrial Education for Practical Nursing, State Department of Public Instruction, Raleigh, North Carolina.

What Are the Problems?

More LPN's are needed (just as more RN's are needed) to serve the people over the State. There is also a need to find ways to help small rural hospitals acquire a good nursing staff, especially because so few RN's work in small towns. Yet it is difficult to start a school program in a rural area, because there are not enough patients in the local hospital to afford adequate student practice and experiences in various diseases and conditions; it would often be difficult to find prepared registered nurse teachers, and frequently classroom facilities and sufficient money would not be available for establishing such a course.

LPN's have little difficulty in getting a job. However, not enough positions offer a sufficient salary and "fringe" benefits to attract more recruits to this branch of nursing. Licensed practical nurses, like others, prefer to work where they are made to feel that they have a contribution to make and are recognized as important members of the nursing group.

In many localities in North Carolina, the role of the licensed practical nurse has not been fully recognized and, as a result, LPN's are working far below their level of preparation.

School programs for practical nursing have not been in existence very long in this State. Although the first one opened as recently as 1948, it is the general opinion that health care has improved throughout North Carolina because there have been vocational programs of practical nurse education and that this improvement will continue and increase as the programs expand and graduate more students.

Who Can Help to Provide Better Practical Nurse Education?

Public school administrators, doctors, registered nurses, employers of licensed practical nurses, those who teach them, LPN's themselves, and the public who uses them—all must work together.

Practical nursing students learn by working together in groups.



In these pages, practical nurses, their education, qualifications and duties have been discussed. The Department of Public Instruction is concerned about the sick and infirm in North Carolina—who will take care of them and how well they are taken care of. To help lessen pain, to bring comfort and health through the practice of good nursing care, and to help in rehabilitation and in the prevention of illness are the main objectives of the practical nurse education program.

Where Can More Information on Practical Nurse Education Be Obtained?

Go to the nearest school program of practical nursing and talk to those who are teaching in these programs, or write to:

Assistant State Supervisor of Trade and Industrial Education
State Department of Public Instruction
Raleigh, North Carolina

North Carolina Board of Nurse Registration and Nursing
Education Enlarged
P. O. Box 2129
Raleigh, North Carolina

North Carolina Licensed Practical Nurses' Association
P. O. Box 1165
Raleigh, North Carolina

North Carolina Hospital Education and Research Foundation
Health Careers Committee
P. O. Box 9601
Raleigh, North Carolina

National League for Nursing
The Committee on Careers
10 Columbus Circle
New York 19, New York

The National Association for Practical Nurse Education and Service, Inc.
Suite 1204
475 Riverside Drive
New York 27, New York

SUGGESTED PROCEDURES FOR ORGANIZING VOCATIONAL PROGRAMS FOR PRACTICAL NURSE EDUCATION

The procedure for organizing a program in practical nurse education, whether it is to be offered in a vocational school or in some other agency, is somewhat complicated because of the unusual scheduling requirements, the training relationships that must be maintained with cooperating institutions, and the need for the legal observance of the administrative and educational standards of the North Carolina Board of Nurse Registration and Nursing Education Enlarged (hereafter referred to as the "Nursing Board"), and the North Carolina State Department of Public Instruction. The purpose of this section is to provide suggestions regarding appropriate steps to be followed by school administrators who desire to organize educational programs in practical nursing.

Education Must Be Provided in an Accredited School or Program

Only those schools and programs that meet the educational standards for accreditation established by the Nursing Board may legally engage in preparing students to take the examination which qualifies them to become licensed practical nurses. Programs offered in vocational schools and approved by the North Carolina State Department of Public Instruction must conform to the approved standards of the Nursing Board and be recognized by the Board. Approved standards for schools of practical nursing are outlined in the official bulletin, *Administrative and Educational Standards for Conducting North Carolina Accredited Programs of Practical Nurse Education*.

Essential Steps in Organizing a Program of Practical Nurse Education

1. *Become Acquainted with the Nature and Scope of Practical Nurse Education.*

Personnel responsible for the organizational procedure of a program in practical nursing should become thoroughly acquainted with the authoritative literature in the field so



Training in infant care is an important phase of the Practical Nurse Education Program.

that they may have a clear conception of an accredited program of practical nurse education.

2. Determine the Need for a Program in the Community.

Recent surveys and studies of nursing needs and resources in North Carolina emphasize the inadequacy of health services throughout the State and the need for more educational programs for the education of practical nurses. The school administrator, however, should require statements and supporting data from responsible hospitals and medical and nursing authorities regarding the local need.

3. Determine Interest and Support.

It is important that the administrator determine the nature and extent of the interest, support, and cooperation that may be expected from local hospitals, health agencies, and

nursing groups in the initiation and operation of the program. This may be accomplished by inviting the comments and cooperation of responsible officers of local or area medical, hospital, and nursing organizations. The success of the practical nurse education program is dependent upon the cooperative efforts of all these groups.

4. Determine Availability of Adequate Clinical Facilities.

The availability of hospitals and other agencies that can meet approved standards for clinical practice, offered as part of the practical nurse education program, must be identified and the cooperation of these institutions must be solicited. Approximately three-fourths of the total program must be conducted in hospitals and other agencies approved for such training by the Nursing Board. It is important that the school administrator or his delegated representatives visit the hospitals and other agencies in and near his community whose facilities and personnel may be needed to provide specified areas of clinical practice. These visits should be made: (1) to determine the desire of the agencies to cooperate in the program; and (2) to make a tentative estimate of their eligibility for approval under the standards established by the Nursing Board for practice in the following specific areas of general nursing:

- Medical and surgical nursing, including the care of chronic, aged, and convalescent patients
- Care of mothers and infants
- Care of children

It is recommended that representatives from the Nursing Board and from the North Carolina State Department of Public Instruction accompany the school administrator to each hospital or agency because of the technical assistance which they can provide in outlining the requirements for approval of the clinical facilities for each area. Following determination of the general ability and desire of the agency to affiliate with the program, the school administrator should request the Nursing Board to determine the eligibility of this agency for approval. A report of the Board's action will be sent to the school administrator. Accreditation is necessary since graduates of the prospective program of practical nurse education will not be eligible to take the State licensing examination unless they

have obtained their clinical nursing practice in approved hospitals and agencies.

The following are some of the factors that require consideration during the preliminary visit to representatives of hospitals and agencies:

- Desire to participate in the program
- Designation of the specific practice areas, previously cited, that can be offered
- Number of practical nursing students that can be assigned at any one time
- Availability of qualified registered nurses who can be assigned to assist in the supervision and direction of practical nursing students
- Location of the hospital in terms of commuting distance from the school and transportation costs to students
- Existence of a school for professional nursing within the hospital and the ability of the hospital to provide a sufficient number of patients and variety in types of patient care to offer adequate practice without overlapping or conflicting with the program for professional nursing students.

It is advisable that the school administrator determine promptly whether approved affiliating agencies are available for each of the practice areas. The local program of practical nurse education cannot be approved by the State Department of Public Instruction or accredited by the Nursing Board unless provisions have been made for all phases of required clinical nursing practice.

5. Organize Local Advisory Committee.

The organization of a representative local advisory committee on practical nursing is an essential step in the development of a successful program. All organizations directly concerned with the education and employment of practical nurses should be represented on this committee. The local board of education should invite the proper officer of each of the following organizations to name a representative to the committee:

- County Medical Society
- Hospital Association
- Registered Nurse Association



Caring for children is one of the rewarding experiences which every nurse enjoys.

- Licensed Practical Nurse Association
- Department of Public Health
- An interested citizen

Consultant services by the Division of Vocational Education of the State Department of Public Instruction and by the Nursing Board are available to local school authorities on request. These agencies can give valuable guidance to the local advisory committee, particularly during its formative stages. The local advisory committee is advisory only and is not administrative in its functions. The following are some of the activities that may require the attention of the committee:

- To recommend properly qualified teacher candidates
- To evaluate the proposed curriculum in terms of the standards for practical nursing and the types of nursing needs in the community
- To assist in developing a student recruitment plan and in stimulating community cooperation in carrying out the plan.
- To make recommendations regarding the standard contract between the affiliating agencies and the local board of education. The primary purpose of such contracts is to safeguard conditions under which clinical instruction and practice will be given and to define school agency relationships.
- To suggest types of publicity needed to inform the public and cooperating organizations regarding the functions and contributions of the practical nurse in relation to the entire field of nursing services.
- To help in identifying the need for specific short unit courses for licensed practical nurses. These courses can be of a "refresher" type or a type that prepares the nurse to deal with changing techniques or responsibilities.

These are only a few of the ways that an advisory committee can help the local school administrator and the persons directly responsible for the program. Advisory committees should meet regularly; systematic minutes of these meetings should be recorded.

6. Determine Cost and Prepare Budget.

The principal items of expense involved in initiating a program of practical nurse education include costs of providing appropriate classroom facilities; installation of essential water and electric services; purchase of major equipment, textbooks, reference books, teaching aids, and general instructional supplies; salaries of properly certified teachers, full or part-time supervisors (depending upon the size of the program), and secretarial assistants; and printing and publicity. The local school administrator may obtain considerable detailed assistance in preparing budget items from administrative units in which programs of practical nursing have been organized.

7. Obtain Local Board of Education Approval of Program and Budget.

Before organizational steps are undertaken, it is necessary to obtain assurance that the program will be approved and supported by the local board of education.

8. Apply to the State Department of Public Instruction, Division of Vocational Education, for Approval for Reimbursement.

Before a practical nurse education program can receive State reimbursement, application should be made to the State Department of Public Instruction for approval.

9. Apply to the Nursing Board for Application for Approval to Establish a Program of Practical Nurse Education.

Administrative units proposing to establish a program in practical nurse education should also make application to the Nursing Board if the school is to be accredited and the graduates are to be eligible to take the State licensing examination. This application, obtained from the Nursing Board office, should be on file in that office at least 60 days prior to the Board's next regularly scheduled meeting (January and June). The opening of any new program is subject to the approval of this application.

10. Designate Personnel Responsible for Program and Outline Duties and Responsibilities.

The development of the organizational pattern for the practical nurse education program is a local responsibility. The

following suggestions may be helpful to the local administrator in developing his plan of organization and supervision.

The smooth and effective operation of the program requires close cooperation and coordination of activities of many persons in the organization, including the superintendent of schools, the local director of industrial education, the teachers of practical nursing and nutrition, guidance counselors, and others who will have responsibility for the program in whole or in part. The role of the local advisory committee and other consultants should be included in the total organizational plan. Also, the relationships between local personnel and consultant and advisory personnel at the State level should be recognized and defined.

Certain general principles should be outlined for the guidance of all local personnel. Examples of such principles are suggested in the following statements:

- Legal requirements and educational standards outlined by the North Carolina Board of Nurse Registration and Nursing Education Enlarged will be observed.
- Program approval functions of the State Department of Public Instruction will be recognized and observed
- Every effort will be made to conform to uniform organizational and policy standards developed for North Carolina
- Procedures involving possible deviations from accepted standards or policies will be submitted to the Nursing Board and the State Department of Public Instruction for consideration and recommendation
- The curriculum may vary in terms of organization and method from the outline contained in the educational standards and curriculum for programs of practical nurse education, a publication of the Nursing Board; but it must meet the minimum requirements

The administrator should give careful consideration to the nature of the following activities when assigning responsibilities to the teacher, supervisor, or other personnel:

- Recruitment—policies and procedures
- Student selection—standards and techniques
- Curriculum construction—content and method
- Agency working agreements

- Advisory committee—organization and use
- Supervision responsibilities
- Equipment and supplies—determination of needs—ordering and installing
- Publicity—determination of needs, purposes, and procedures
- Schedule—theory and practice
- Determination of forms for reports and records—putting them into use
- Determination of appropriate uniforms—standards for their care
- Determination of charges for students within and outside of the jurisdiction of the board of education
- Provision for student health
- Graduate placement and follow-up activities
- Organization of extension or refresher classes

11. *Provide Adequate Classrooms and Facilities.*

It is recognized that the problem of providing adequate space and facilities is a difficult one in many schools. It is recommended that personnel responsible for the proposed program of practical nurse education analyze methods of dealing with the local housing problem in one or more existing programs in the State. Basic classroom facilities should be provided in the local public school buildings rather than within the hospitals if the responsibility for the administration of this program is assumed by the local board of education. Rooms and facilities used for conducting the program should be approved by the Nursing Board and the State Department of Public Instruction.

12. *Purchase and Install Equipment and Supplies.*

The administrator, in dealing with this step, can profit considerably from the experience of schools that have organized programs of practical nurse education in recent years. Representatives of the Division of Vocational Education of the State Department of Public Instruction should be consulted concerning this matter. It is also possible that representatives of local hospitals can offer helpful suggestions.

The responsibilities for providing equipment and supplies should be discussed and thoroughly understood by

school officials and affiliating agencies, and should be clearly stated in detail in the working agreement of affiliation. (A sample copy of a working agreement may be obtained from the State Department of Public Instruction.)

13. Determine Teachers' Salaries.

Salaries of practical nurse education teachers are paid monthly by local boards of education which are reimbursed from funds provided by the State Board of Education.

While the amount of State reimbursement on salaries is

The practical nursing student learns about the use of instruments in patient care.





The practical nursing student must be well trained in the techniques of rehabilitation nursing.

usually the full amount of the State salary schedule, local schools may pay salary supplements.

14. Employ Qualified Teachers.

This is one of the most important functions of the local administrator, because the ultimate effectiveness of the program will depend largely upon the background, point of view, education, and breadth of experience of the teachers.

Before a vocational teacher can be legally employed in a public school in North Carolina, she must qualify for a certificate issued by the North Carolina State Department of Public Instruction for the subject which she is to teach and must be licensed by the North Carolina Board of Nursing.

15. Complete Written Agreements with Affiliating Hospitals and Agencies.

This is an extremely important step because the discussions leading to a written agreement, as well as the agreement itself, offer an opportunity to avoid potential conflicts regarding the conditions for students during their clinical nursing practice, to clarify the training relationships be-

tween the school and the agency, and to safeguard the educational function in all areas of clinical practice.

The working agreement of affiliation should be studied carefully and discussed by officials of the school and co-operating agency. Particular attention should be given to the following topics so that all of those concerned may clearly understand the provisions of the agreement:

- The nature and scope of the responsibilities of the local board of education and of the affiliating institution or agency in the total educational program of the practical nursing student.
- The general and specific objectives of clinical practice in the affiliating agency and the manner in which the organized educational experiences provided in the hospital or agency are expected to contribute to the total objectives of the educational program. Balanced experience covering all phases of the total program is essential.
- A clearly defined plan for the orientation of students to the organization of the affiliating agency.
- A detailed listing of the members of the school faculty and their cooperative relationships with specific personnel in the affiliating agency.
- A detailed listing of the hospital or agency personnel who will assist in the supervision or guidance of students during the general nursing period, the qualifications they should possess, the specific responsibilities and relationships they must observe, and provisions for joint planning and evaluation of training procedures with school personnel.
- A detailed plan for the scheduling of clinical instruction in the varying types of experience covered during the theoretical period.
- Provisions for classroom instruction, as well as supervised clinical practice, including understandings about the use of the library, appropriate equipment, and other facilities required for the total period of the program.
- The maximum number of students to be assigned to the affiliating hospital at any one time and the time-commitments covering these assignments.
- The nature, range, and time-allotments of day, evening,

and night practice assignments in the affiliating agency. (These assignments must be in accordance with Nursing Board regulations.)

- Arrangement for maintenance and living accommodations for students during the one-year program.
- Understandings concerning the extent to which the affiliating agency will assist in the maintenance of student health and the care of the student during illnesses.
- Arrangement of school hours and days per week.
- Arrangements for vacations and holidays.
- Understanding regarding the use of the school uniform.
- Provisions for school-hospital planning, coordination, and relationship with students through joint conferences during the practice period.
- Provisions for dismissal of students if the need for this action arises.
- Arrangements concerning the cost of student transportation to and from the affiliating agency if this is a factor requiring consideration.
- Understandings and specifications concerning the types, uses, and availability of essential records and reports used in the program and in the affiliating agency.

16. *Organize a Publicity Program.*

Well-planned publicity designed for specific purposes is an essential in the organization and operation of a practical nurse education program. Because of its comparative recent recognition as a vocation which can make important contributions to patient care and community health needs, there is considerable lack of understanding regarding practical nursing and its specific characteristics. A publicity program should include activities that will foster better understanding and relationships with cooperating groups, as well as provide information for the public and prospective students concerning the program and the opportunities it offers.

A publicity plan may be initiated for the primary purpose of recruitment in the beginning; but it is important that a long-term, continuous program be developed for the purposes of further recruitment, better coordination and support of program efforts, effective placement, the establishment of occupational extension courses for licensed



This student is learning how to sterilize supplies in an autoclave.

practical nurses, maintenance of standards of education that will prevent unwarranted overlapping of functions of the practical nurse and the registered nurse, and other specific objectives.

17. *Develop Student Selection Standards and Recruitment Procedures.*

The laws of North Carolina relating to practical nursing (January 1954) specify that an applicant for a license to practice practical nursing must have certain qualifications. The following list indicates those qualifications which must be considered in accepting a student:

- Have attained his or her eighteenth birthday by graduation. (An applicant for a license must be eighteen years of age.)
- Be a citizen of the United States.
- Be of good moral character.
- Be in good physical and mental health.
- Have completed at least one year of high school or the equivalent. (Many vocational programs require that the student be a high school graduate.)

- Have attained satisfactory scores on selected admissions tests.

Effective recruitment is of vital importance to a successful program of practical nurse education; therefore, all reasonable approaches to recruitment should be explored and utilized:

- Committees responsible for the recruitment of students for professional schools of nursing should be encouraged to accept the additional responsibility of recruiting for the practical nurse education program.
- Advisory committees are often able to suggest special recruitment committees or special recruitment procedures that will be effective within the community.
- Guidance counselors within the area should be encouraged to assist in the guidance and recruitment of qualified persons.
- Effective recruitment publicity, through such media as newspapers, brochures, bulletins, pamphlets, talks, and personal contacts, can be designed to appeal to the interests and needs of special groups in the community.

18. Determine Curriculum Content.

The development of the curriculum will be influenced by the minimum time requirements for the teaching units of instruction that compose the total program noted in the Administrative and Educational Standards for Conducting North Carolina Accredited Programs of Practical Nurse Education. This arrangement of instructional units, however, is not necessarily intended to suggest a specific curriculum pattern that should be adopted in every local program.

It is fitting that each community should have the privilege of determining its own curriculum approach and organization. It is equally important, however, that established time distributions for specific areas of instruction be observed.

The prospective teacher should be employed far enough in advance of the actual beginning of classes to participate in the curriculum construction activity. The proposed curriculum should be reviewed and should receive the general approval of the advisory committee and other persons quali-

fied to evaluate it before it is submitted to the local board of education, the State Department of Public Instruction, and the Nursing Board for formal approval.

19. *Provide for Occupational Extension or Refresher Courses.*

Planning for a practical nurse education program should include provisions for short units of instruction designed to meet specific needs of licensed practical nurses. These short courses, which deal with clearly defined areas of nursing practice and theory, are usually offered in the extension programs of the vocational schools. Many practical nurses who became licensed under waiver provisions recognize the necessity for training in areas of practical nursing which were not available to them before licensure, and many graduates of programs of practical nurse education also wish further educational opportunities.

The cost of programs of this type to the local community is comparatively small, but the returns to the community are large in terms of improved patient care.

Practical Nurse Education Programs can be a vital force in the community. Not only do they furnish added trained personnel to assist in the care of the sick and injured, but they also provide a satisfying and remunerative occupation for both the young and the mature. This program is a concentrated effort of the public at large to educate personnel for the care of the sick and injured—an important effort with significant and purposeful objectives.



Graduation marks successful completion of the 1 year course in practical nursing.

